

PERFORMER EVALUATION FORM

On Your Mark, Get Set... Read!- 2016

This form **MUST** be returned for your library to be eligible for a performer grant next year.

Library _____

Address _____

_____ Zip _____

Performer _____

Date of performance: _____ Place of performance: _____

1. Were the performers on time and was the program well planned?
2. Did the performance relate to the theme of **On Your Mark, Get Set...Read!**?
3. How did the audience respond, both children and adults?
4. How many children in the audience? _____ adults? _____
5. Would you have this performer (these performers) again?
6. Please rate the performance: _____excellent, _____good, _____fair, _____poor
Specific comments/critique:

7. Do you have any suggestions of additional performers for next summer when the theme will be "Build a Better World"?

Please sign: _____ Position: _____

Please return within **one month** of the performance to:

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